

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4) **Summary Sheet**

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REPORT

assistance in completing this form, see instructions on the re	everse side.	TOTAL PAGES IN ENTIRE CFA-4
IS THIS AN AMENDMENT? Yes	☑ No	4

CC	DMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization)	Check if this is a new n	ame		
COMMITTEE TO ELECT RICK	L. TAYLOR			
2. Acronym or Abbreviated Name (if any)		3. Committee Tel		
		(317)7	<u> 13-693</u> 0	4
4. Mailing Address (address where all campaign finance corresp	ondence is received) 🔲 Ch	eck if this is a new	address	
1352 CLINTON ST				
5. City, State, ZIP Code		6. Party Affiliation		
NOBLESUILLE IN 46060		REPUBL		
CANDIDATE INFOR	MATION (For Candidate's Co	ommittees Only,)	
7. Full Name of Candidate (include any nickname)		8. Party Affiliation	or If Independer	nt Candidate
RICK L. TAYLOR				
9. Office Sought (Include district number, if any. Not required for		10. County of Res	_	
CITY COUNCIL DISTRICT #3	3	HAMILT	0N	
TYPE OF REP	ORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:			Check one:	
Pre-Primary Pre-Election Annual Normination Other			Pre-Con	
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Urgoing Ti	reasurer (within 10 days amend Statement of	Organization)	Post-Cor	rvention
12. Reporting Period:			DLUMN A	COLUMN B
From: 4-9-11 Through:	<u>12-31-11</u>	Th	is Period	Year to Date
13. Cash on hand and investments at the beginning of this repor	ting period.	879	9.30	
14. Cash on hand and investments January 1, current year.				Ð
CONTRIBUTIONS AND RE				
(Note: these amounts include in-kind contributions and loans, as	well as cash contributions.)		6.00	11150.00
15a. Itemized (use Schedule A)		60	0.00	4150.00
15b. Unitemized			Θ	100.00
15c. Add lines 15a and 15b in both columns	SUBTO		00.00	4250.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in C	olumn B T	OTAL 14	19.30	4250.00
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan rep				1/- 6
17a. Itemized (use Schedule B) (Public Question: use Schedule	C)	14	68.51	4239,01
17b. Unitemized			O	<u>Q</u>
17c. Add lines 17a and 17b in both columns		OTAL 14	68.51	4239.21
18. Cash on hand and investments at close of this reporting period (subtra	act 17c from 16 in both columns)	TOTAL	10.79	10.79
19. Debts OWED BY the committee (use Schedule D)	- 		0	j de la de
20. Debts OWED TO the committee (use Schedule E)			0	
=	CATION		F	FOR OFFICE USE ONLY
	MY KNOWLEDGE AND BELIEF IT IS TE	RUE, CORRECT AND		12 JAK -6 AM 10: 3
itt		Date		0 -01 M
	reasurer	1-3	-12	
		Date	_ , _	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<u>L</u>	to or used for any commercial ourses	/C 3:04 51 A ======	-/2	
or or	le or used for any commercial purpose. (I who fails to file a complete or accurat	e report as required b	y the Indiana	
<u>kd</u>	may be subject to civil penalties. (IC 3-9-	4-16, IC 3-9-4-17, IC 3	9 4 18)	



(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER						
Page		i	of _	2		

	.		<u> </u>	
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED
(street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
	Direct			-1.1.
KENNETH H. BIRK	In-Kind (describe)			5/17/11
450 E GREYHOUND PASS	Other Receipts:	4-0-0		
450 E. GREYHOUND PASS CARMEL, IN 46032	☐ Interest ☐ Loan ☐ Misc. (specify)	100.00		RICK
	i i i i i i i i i i i i i i i i i i i			TAYLOR
Contributor's Occupation (# required)	Contributions:	-		777507=
4.	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Misc. (specify)			
Contribute de Occupation (Francisco)				
Contributor's Occupation (if required)	Contributions:			
	Direct			
	☐ In-Kind (describe)			
	Other Receipts:			
	Misc. (specify)			
Contributor's Occupation (if required)				
4.	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Misc. (specify)			
Contributor's Occupation (if required)				
5.	Contributions:			
	Direct			
	n-Kind (describe)			
	Other Receipts:			
	interest Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 100.00		
TOTAL OF ALL PAGES OF SCHEDULE		100,00		
(Enter total on ITE	I 15a of the Summary Sheet)	<u> </u>		



(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			,
HAMILTON CTY FF LOCAL #4416 PAC	In-Kind (describe)			4/13/11
23 SOUTH 8TH ST # 100				
NOBLESVILLE IN 46060	Other Receipts:	500,00	2000.00	RICK
DUBLESVILLE IN 46060	Misc. (specify)		2000	TAYLOR
	-			THYCOK
2.	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	interest Loan		ļ	
	Misc. (specify)			
3.	Contributions:			
- -	Direct			
	In-Kind (describe)			
•	Other Receipts:			
	☐ Interest ☐ Loan		{	
	Misc. (specify)	İ		
4.	Contributions:			
	☐ In-Kind (describe)			
	Other Receipts:	[
	Interest Loan			
	Misc. (specify)			
5.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	Misc. (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 500.00		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)	\$ 600.00		
Lines total on the	or the outilities y offeety	<u>\u0000000000000000000000000000000000</u>		



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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a catendar year MUST be iternized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER				
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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code O STAPLES 16751 CLOVER RD NOBLESILUE IN 46060	COMPLITER INK., PAPER	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	63.42	194.38	4/9/11
BLAKE WISELOGLE 8305 SLARSDALE CT INDPLS IN 46256	S16NS	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	150.00	1640.00	4/,,/,,
STAPLES 16151 CLOVER RD NOBLESVILLE, IN 46060	COMPUTER INK	Direct In-Kind Di-Payment of Debt Returned Contribution Other Purpose:	51.34	245.72	4/14/11
PIP 11711 N. PENN 107 CARMEL IN 46032	2-SIDED POSTCARDS	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	768.68	768.68	6/13/11
BLAKE WISELDGLE 8305 SCARSDALE CT INDALS IN 46256	J16NG	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	350,00	1990.00	4/15/11
CODE D RICK/SANDY TAYLOR 1352 CLINTON ST NOBLESVILLE IN 46060	EASOUNE	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: 417111	72.99	199.13	10/3/11
CODE PO RICK ISANDY TAYLOR 1352 CLINTON ST NOBLESVILLE IN 46000	PAPEL	Direct In-Kind Payment of Debt Returned Contribution Dother Purpose: 4/20/11 STDPLES	12.08	ગા. ત	10/3/11
	SUBTOTAL THIS PAG	SE OF SCHEDULE B	\$1468,51		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON THE Enter total on ITEM 17a of the		\$1468,51		